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BIBDATASHEET

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CONFIRMATION NO. 2794

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APPLICANTS										
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** CONTINUING DATA **********************************										
** FOREIGN APPLICATIONS ************************************										
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/24/2002										
35 USC 119 (a-d) conditions met yes Met after Allowance						SHEETS		TAL	INDEPENDENT	
						AWING 4		IMS 8	CLAIMS 3	
ADDRESS BRINKS HOFER GI P.O. BOX 10395 CHICAGO , IL 60610	LSOI	N & lione								
TITLE Dual-lid cigarette co	ntain	er and method of packa	ging ciga	rettes						
	FEES: Authority has been given in Pap No to charge/credit DEPOS No for following:						All Fees			
				er SIT ACCOUNT		1.16 Fees (Filing)				
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RECEIVED N					1.18 Fees (Issue)					
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